

Opioid Operational Command Center Operational Period Summary

Operational Period	Start	Monday, April 17, 2017 at 1200 hours
	End	Monday, May 1, 2017 at 1159 hours

Operational Period Objectives and Tasks

- Objective:** Implement OOC strategic statewide planning and response efforts

Tasks

Task	Deadline	Responsible Entity	Status
Request Council members to identify representatives on behalf of their state agency to serve as senior policy working group members	4/21	OCC Director	In Progress
Convene senior policy workgroups to further define activities within the OOC Strategy	5/1	Planning Section	In Progress
Identify OOC statewide citizen advisory group populated by those affected by the heroin and opioid crisis in Maryland	5/1	Planning Section	In Progress
Identify and engage federal, state, and local law enforcement leaders to develop strategies around illicit drug supply disruption in Maryland	5/1	Planning Section	In Progress
Plan a round table for identified law enforcement leaders to discuss strategies around illicit drug supply disruption in Maryland to be hosted at MEMA	5/1	Planning Section	In Progress

- Objective:** Standardize care across all 49 acute care hospital emergency departments for patients who present with an overdose

Tasks:

Task	Deadline	Responsible Entity	Status
Conduct follow-up meeting with Maryland Hospital Association Emergency Department Directors to discuss feasibility of ED SOP for OD patients	4/21	Planning & Health and Medical	In Progress
Coordinate meeting corresponding to Carroll County Cabinet Day to engage local leadership and hear best practice at Carroll Hospital around emergency discharge efforts for patients who	5/1	Planning & Health and Medical	In Progress

experience non-fatal overdose [5.11.2017]			
Identify small working group of engaged ED directors	4/21	Planning & Health and Medical	In Progress
Prepare draft best practices standards for ED and hospitals for the treatment of opioid addiction and overdose	5/1	Planning & Health and Medical	In Progress
Initiate the development of an ED standard protocol based on best practices for patients who present with an overdose e.g. SBIRT, OD education & take-home naloxone kit, peer-recovery specialist referral	5/1	Planning & Health and Medical	In Progress

3. **Objective:** Reduce supply of illicit opioids and other harmful substances to support National Drug Take-Back Day (NDTBD) on 4.29.2017

Tasks:

Task	Deadline	Responsible Entity	Status
Contact Director of DHMH Prescription Drug Repository Program for information sharing	5/1	Planning	Complete
Promote DHMH Prescription Drug repository program through OCCC website, social media, etc	5/1	Planning	Complete
Coordinate activity with the Lt Governor's Office to attend a drug takeback event day-of NDTBD in Howard County	4/21	Planning	Complete
Reach out to OCCC PIO representatives to identify messaging and activities for NDTBD to coordinate efforts	5/1	JIS/ Communications	Complete
Contact local EM liaisons to assemble a list of all take-back locations in participating counties and share with partners	5/1	Local Liaison	Complete
Collect drug take back education materials from state, local and federal partners	5/1	JIS/ Communications + Operations	Complete
Distribute materials to state and local partners, targeting community health fairs, schools, social services, and community-based organizations on NDTBD	4/29	Operations	Complete
Develop and distribute OCCC press release template to state and local partners providing details on NDTBD	4/21	JIS/ Communications	In progress

4. **Objective:** Track and report on overdose related statistics on an ongoing basis

Tasks:

Task	Deadline	Responsible Entity	Status
Conduct a county analysis of the fatal and non-fatal ED visit overdoses in Maryland by population	5/1	Health and Medical	Complete

Incorporate eMEDS naloxone data reports into Public Health Preparedness and Situational Awareness reports	5/1	Health and Medical	Complete
Amend data sharing use agreement between MIEMSS and DHMH regarding confidential health information data	5/1	Planning-Data Unit	In Progress
DHMH to request confidential health information of emergency medical services run data from MIEMSS	5/1	Planning-Data Unit	In Progress
Coordinate creation of standing automated report format of eMEDS confidential health information to DHMH and then to local health department	5/1	Planning-Data Unit	No Progress
Collect additional aggregate-level data points reported to the OOC state dynamic health index	5/1	Planning-Data Unit	Complete
Complete opioid-related survey of emergency departments with MD chapter of ACEP	5/1	Health and Medical	Complete
Produce business card sized emergency treatment / resource card for EMS providers to leave with patients who are treated at the scene but refuse transport	5/1	Health and Medical	Complete
Begin planning first meeting of SEOW (Statewide Epidemiological Outcomes Workgroup)	5/1	Planning-Data Unit	In Progress

5. **Objective:** Develop a demobilization strategy that transitions the OOC from crisis management to project management phase.

Tasks:

Task	Deadline	Responsible Entity	Status
Identify and hire OOC program support manager	5/1	OOC Director	Complete
Draft the year-1 project management work plan and structure with clear roles for State and local agencies	5/1	Future Planning Unit	In Progress

6. **Objective:** Develop OOC budget and spend plan to support OOC operations.

Tasks:

Task	Deadline	Responsible Entity	Status
Compile SUD and heroin/opioid inventory items and related financial data received from agencies.	5/1	Finance/Admin	In progress
Approve FY 2017 budget	5/1	Finance/Admin	In progress
Review and assess impact of HOPE Act on FY 2018 and out year	4/21	Finance/Admin	Complete

spend plan			
Update the FY 2018 spend plan.	5/1	Finance/Admin	In progress
Finalize OOCC MOU between DHMH and MEMA	5/1	Finance/Admin	Complete
Distribute OOCC personnel tracking worksheet by work hours with guidance	5/1	Finance/Admin + Planning	In progress

7. **Objective:** Implement OOCC Communications Strategy

Tasks:

Task	Deadline	Responsible Entity	Status
Launch OOCC "Before It's Too Late" communications strategy including a campaign website and social media platform	4/19	JIS/Communications	In Progress
Launch OOCC internal Share Point website	5/1	JIS/Communications	In Progress
Schedule a series of information sessions with media outlets where each agency can share work regarding heroin and opioid-related initiative (e.g. WBAL and MPTV).	5/1	JIS/Communications	In Progress
Develop a press release and provide template to state and local partners	5/1	JIS/Communications	In Progress
Create OOCC letterhead template	5/1	JIS/Communications	In Progress

8. **Objective:** Facilitate operational coordination among state agencies and partners working on heroin and opioid-related initiatives

Tasks:

Task	Deadline	Responsible Entity	Status
Develop draft OOCC Response Plan, highlighting OOCC initiatives with a corresponding local template, including communications to guide actions during an overdose response event	5/1	Planning	In Progress
Update and share OOCC Concept of Operations to outline coordination roles and responsibilities of OOCC partner agencies	5/1	Planning	In Progress
Share all documents with local emergency managers to use as a template for local planning and response efforts	5/1	Operations	Complete
Coordinate call with public health officers and emergency managers.	5/1	Health and Medical	Complete

Continue to engage local health departments on draft Response SOP and incorporate feedback into a final draft document for approval and implementation.	5/1	Health and Medical	In Progress
Complete final 2 surveys (out of 24) of local school systems to highlight best practices and gaps in addressing the opioid epidemic	5/1	Education Branch	Complete
Complete a School Naloxone Administration Policy Development Frequently Asked Questions document for use by local school systems	5/1	Health and Medical/Education	In Progress

9. **Objective:** Reduce inappropriate or unnecessary opioid prescribing through education and awareness activities

Tasks:

Task	Deadline	Responsible Entity	Status
Convene a meeting between Health and Medical and Education to discuss the June Academic Deans meeting, including setting a date and drafting an agenda.	5/1	Health and Medical/ Education	Complete
Review barriers to treatment/payment for treatment, to include determining the feasibility/appropriateness of a provider workgroup and the impact from recently passed legislation.	5/1	Health and Medical	Complete
Refine strategy to engage and educate DHMH employees on opioid misuse/abuse awareness.	5/1	Health and Medical	Complete
Continue to engage healthcare providers in opportunities for continuing education around appropriate opioid and Naloxone prescribing and dispensing.	5/1	Health and Medical	In Progress
Develop a strategy to engage Maryland Responds volunteers to provide naloxone training through the Overdose Response Program.	5/1	Health and Medical	Complete
Survey 42 Maryland colleges and universities on Naloxone administration policies and procedures and drug addiction prevention and intervention programs	5/1	Education	Complete
Analyze passed legislation to inform OOCC Health and Medical planning and programming.	5/1	Health and Medical	Complete

10. **Objective:** Synthesize heroin and opioid related programs to reduce duplication of effort**Tasks:**

Task	Deadline	Responsible Entity	Status
Confirm inventory of heroin/opioid programs listed in the Inter-Agency Heroin and Opioid Coordinating Council's February 2016 report	4/18	Finance/Admin Section	In Progress
Use social services branch heroin and opioid inventory to inform branch objectives	5/1	Social Services Branch	In Progress
Survey local social services partners for potential data fields to be captured in DHR systems to support substance abuse and addiction reporting	5/1	Social Services Branch	In Progress
Expand the Social Services Branch to include the Department of Disabilities and the Department of Aging.	5/1	Social Services Branch	Complete
Synthesize submitted inventories into master document to be shared with resources section.	5/1	Finance/Admin Section	In Progress
Utilize inventories collected within respective branches to conduct preliminary gap analysis.	5/1	Operations Section	In Progress
Work with the Departmental POC's to generate budgeted and historic expenditure estimates for their heroin/opioid programs and services.	5/1	Finance/Admin Section	In Progress